#### FOR INSTRUCTIONS, SEE BACK OF FORM

## **DISCLOSURE SUMMARY PAGE**

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

JA ETHICS AND

2011 JAN 19 PH 12: 49

COMMITTEE NAME (Must be same as on Statement o	f Organization)	1		
Reasoner For State Representative	1 [	FORM		
IMPORTANT: Indicate by # type of committee you are reportin (1) Statewide/Legislative/Judge Standing for Retention Candid (4) County Central Committee (5) County Candidate (6) City Subdivision Candidate (8) County PAC (9) City PAC (10) State (10) Local Ballot Issue  CANDIDATE COMMITTEES ONLY: Candidate Name	late (2)State PAC (3)State Party	(R Fo	Proffice Use Orling	1343
Michael J. Reasoner	Democratic			
Office Sought District (if Senate or House)			dited	
Late reports are subject to possible civil and criminal penaltie candidate's committee, and the chairners on for any other type.	s. Pursuant to Iowa Code sections 68B.32A(7)	and 68A	.401(3), the can	didate, for a
candidate's committee, and the chairperson, for any other typ  Mike Peasoner  SIGNATURE OF PERSON FILING REPORT	641- 782-2693 TELEPHONE	filing tir		e reports.
LAME THOSE A. Londow 10, 2011		<del>-</del>		
I AM FILING A January 19, 2011	REPORT FOR (1) ELECTION /(2)	_	LECTION YEA	R.
(report date)	Indicate by #	<u>l</u>		
CHECK IF AMENDMENT TO REPORT DATED	Loca	al Comm	nittees, enter Date	of Election
☐ Check if this is final (termination) report and attach Not (You must continue to file reports until a DR-3 is	filed )	nty & Lo	ocal Committees, o	enter County in
STATEMENT OF CASH ON H	AND			
CASH ON HAND at the beginning of the reporting period. committee. This amount MUST be the same as	(Total of all funds held by the		17,779.71	
CASH ON HAND at the beginning of the reporting period	(Total of all funds held by the the cash on hand at the end s is first report filed.)	\$	17,779.71	
CASH ON HAND at the beginning of the reporting period. committee. This amount MUST be the same as of the last reporting period or must be zero if this ADD TOTAL MONEY TAKEN IN THIS PERIOD	(Total of all funds held by the the cash on hand at the end is first report filed.)		17,779.71	
CASH ON HAND at the beginning of the reporting period. committee. This amount MUST be the same as of the last reporting period or must be zero if this ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A).	(Total of all funds held by the the cash on hand at the end is is first report filed.)		834.37	
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CASH ON HAND at the beginning of the reporting period. committee. This amount MUST be the same as of the last reporting period or must be zero if this ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule F: Loans Received total (Attach Schedule H: Total Sales of Campaign Property (Schedule H applies to Candidates' C SUBTRACT TOTAL MONEY SPENT THIS PER Schedule B: Expenditures total (Attach Schedule	(Total of all funds held by the the cash on hand at the end is is first report filed.)  Chedule A) (*also see in-kind below)  Chedule F)  Chedule F)  Chedule F)  SUB-TOTAL  SUB-TOTAL  SUB-TOTAL	\$	834.37 0.00 0.00 18,614.08	
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### For Instructions, See Back of Form

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

(including candidate's personal funds)	(107:07/00)	INCCEIF 13
COMMITTEE NAME (Must be same as on Statement of Organization) Reasoner For State Representative	ı —	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
10-28-10	ID# <sub>6498</sub> CK# <sub>2113</sub>	Well PAC P.O. Box 9232 Des Moines, Iowa 50306-9232		\$ 500.00	INCOME
10-28-10	ID# CK#	James Obradovich 2418 35th Street Des Moines, Iowa 50310-4549		25.00	
11-1-10	1D# 6237 CK# 2296	ABATE PAC 3118 Eastern Avenue, NE Cedar Rapids, Iowa 52402		300.00	
11-8-10	ID#	Iowa State Savings Bank 401 West Adams Street Creston, Iowa 50801	Check. Acct. Int	5.72	
12-13-10	CK#	Iowa State Savings Bank 401 West Adams Street Creston, Iowa 50801	Check. Acct. Int	3.65	
	CK#				
	ID# CK#			<del> </del>	
	ID# CK#				
	ID# CK#				
	ID# CK#				
			SUB-TOTAL	924.27	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_\_\_\_1 (for Schedule A)

834.37

TOTAL (if last page of this schedule)

SCHEDULE

MONETARY

	100	<b>CO. 15</b>	DOM:NAME
120			AUE

# **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAME (Must be same a	s on Statement of Organization)
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Reasoner For State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-27-10	ID# CK#	Garner Printing 1697 NE 53rd Avenue Des Moines, Iowa 50313-2180	Literature, postage and handling	\$ 3,404.31
10-29-10	ID# CK#	American Directions Group 1350Connecticut Ave,NW, Ste1102 Washington, DC 20036	Campaign voter research	3,000.00
10-29-10	ID# CK#	Iowa State Savings Bank 401 West Adams Street Creston, Iowa 50801	Transaction fee	20.00
11-2-10	ID# CK#	Hy-Vee 3221 SE 14th Street Des Moines, Iowa 50320	Campaign refreshments for supporters	260.46
1-22-10	ID# CK#	American Directions Group 1350Connecticut Ave,NW, Ste1102 Washington, DC 20036	Refund for campaign voter research	(2,372.64)
2-31-10	ID# CK#	Mike Reasoner 702 New York Avenue Creston, Iowa 50801	Mileage - 1,087 x .50	543.50
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	\$ 4,855.63

TOTAL (if last page of this schedule)

\$ 4,855.63

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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